

CLAIMS ONLY							Application Number 10784329		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1							51				
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48							98				
49							99				
50							100				
Total Indep	1		1		1		Total Indep				
Total Depend	22		22		22		Total Depend				
Total Claims	23		23		23		Total Claims				

CLAIMS ONLY							Application Number 10784-329		Filing Date	
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST ^{Third} AMENDMENT		AFTER SECOND AMENDMENT					
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